

VSH Governing Body Meeting Minutes

January 17, 2007, 1:30 pm

Medical Director's office

Type of meeting:	Oversight
Facilitator:	Dr. Bill McMains for Steve Gold
Note taker:	Denise McCarty
Governing Body Members:	Dr. Bill McMains; Terry Rowe; Dr. Tom Simpatico; Dawn Philibert (designee for Sharon Moffatt); Frank Reed (designee for Barbara Cimaglo); William Alexander; Beth Tanzman (designee for Steve Gold)
Attendees:	Jessica Oski; Wendy Beininner; Michael Hartman, Scott Perry; Public: Michael Sabourin

AGENDA TOPICS: APPROVAL OF MINUTES FROM 12/20/06, EXECUTIVE DIRECTOR'S REPORT, QUALITY MANAGEMENT REPORT; MEDICAL DIRECTOR'S REPORT, OTHER BUSINESS.

Discussed: The December 2006 meeting minutes were reviewed. TR recommended to correct the minutes to reflect that “we are not the only hospital that allows smoking”. BM suggested to change language under the Level of Autonomy and Supervision section, minutes reflect that “Bill McMains moved to approve the policy, Frank Reed seconded, all in favor, policy approved. DP asked to correct the spelling of Sharon Moffatt’s name in the minutes. BM made a motion to accept the minutes with corrections, DP seconded the motion. All in favor. Minutes were approved with corrections.

Conclusion: 12/20/06 minutes were approved with corrections.

Action: Corrections will be made to the minutes by Denise

Person Responsible: Denise

Due Date:

Discussed: Executive Director’s Report (Terry Rowe)

New IT Project Manager: We have just hired Andy Lowe as our IT Project Manger. We are very glad he is here as we have a lot of projects that need undertaking. **Securing VSH Parameters:** TR handed out a sketch/ outline of the hospital parameters and reviewed areas of the hospital where she is recommending to have card readers installed to limit access through the tunnels. New card readers would be placed in the hallway leading to the Admissions office, Nursing Administration area, and back door in the tunnel. After hours, the only port of entry would be through the front door of Admissions. There would be a camera and outside speaker phone installed in admissions as well as a card reader. The back door would be open from 8 am to 4:30 pm, Monday through Friday. The project would cost an estimated \$20,000. Questions followed. Patients who had ground rights may be issued a day pass so they could access the canteen. More details were discussed as to the impact of this project and security issues. We have saved money from IT and so we can use this money for this project. BGS will assess the computer operated electronic door system and make recommendations about possible conversion to a new push button system that could cost approximately \$4,000.

Public Comment: Q: How old is the current system? A: The system was installed when we did renovations to the Brooks Rehab unit several years ago.

Conclusion: n/a

Action: None needed at this time.

Person Responsible: N/A

Due Date: N/A

Discussed: Quality Management Report (Scott Perry)

SP reviewed his report on Injury Reports, Variance Reports, Patient Grievances for the month of December 2006. There was a correction made to the number of patient injuries in December. There were 7 injuries in December not 6, because one patient fell. BM asked if there were any quality initiatives. SP indicated that quality initiatives were being taken surrounding emergency and involuntary procedures information. Dr. Simpatico is currently manually extracting information from the reports to put into data. However, Wendy Magee is a Psych Consult expert. She is working with our Psych Consult software to craft information that QA can use. BM asked when reporting will be reutilized and more available. SP indicated that this should be possible in a couple more weeks.

BM indicated that the Governing Body would be interested in viewing this data on a regular basis. SP said that QA is working on

initiatives that would comply with DOJ requirements.	
Conclusions: Psych Consult will be able to generate more QA information to present to the Governing Body on a regular basis	
Action:n/a	
Person responsible:n/a	Due Date:
<p>Discussed: Medical Director's Report (Dr. Tom Simpatico)</p> <p>Items to be discussed: Census updates, Treatment Planning, Health Information Capabilities. The census has been high for the last several months, hovering in the 50's. There are a number of VSH patients that fall under nursing home care or traumatic brain injury care. Currently there are four patients that have viable placements elsewhere in the next few weeks that have been here for at least a year. This transition will open up availability on Brooks Rehab. This also opens the opportunity to transition others to Second Spring if it opens in March as there are six people waiting to enter VSH that are being held elsewhere until the census goes down. BT asked if the high census was still due to the length of stay rather than the number of admissions which seemed to be the case back in October. BT suggested that this trend in admissions versus length of stay would be useful to track and analyze for future discussions. Further discussion followed.</p> <p>Treatment Planning – We are reworking basic materials that we use to complete treatment plans. There was a new form that was rolled out six weeks ago. We have identified a group of “coaches” that can help create a slate to identify what the social worker role is, what the psychiatrists role is and so on. We are video taping treatment plans on an interim basis. This will allow teams to watch the videos and critique themselves. The data that is collected will be put in an access database to collect information to focus on identifying strengths and non-strengths. Dr. Geller will coming back on a periodic basis to sit in on video sessions and provide feedback/instructions to teams to improve the quality and strengthen team work. The reaction from staff about the new treatment plan was discussed. They seem to be committed to making changes.</p> <p>Public comments: There was a question from the public asking if there was a waiver of release from the patients whose treatment planning meetings are being taped. TS indicated that we are only recording patients meetings who give their permission to do this. If they do not give permission, we will not tape them. Also, the disks that are being used to record on are being destroyed after the data is collected. We are not keeping anything. A comment that in the future, these videos may be of good use to use as a learning/teaching library.</p> <p>Electronic Health Records- The Secretary has formed a Task Force to examine the electronic health records system. The Task Force has been meeting for the last few weeks. The Task Force is compiled of clinicians and technology people. The CRIS system is being reviewed and the group is compiling information and actively engaging in discussion about patient records and confidentiality issues. The Task Force will have a set of recommendations to the Secretary in the next few weeks.</p>	
Conclusions: no action needed at this time	
Action:n/a	
Person responsible:	Due Date:
<p>Discussed: Interim Mandatory Reporting Policy (Jessica Oski)</p> <p>JO explained that there was a pressing need to revise the existing mandatory reporting policy to comply with DOJ. DP asked why the policy was interim. WB said that due to the timeline that DOJ required, the revised policy needed to be in effect within a certain time</p>	

frame to comply with DOJ. JO read over the sections and explained if the section was changed and why because the copies that the members had was not a red line version that showed where the changes were made. Questions were asked about certain sections. BT raised concerns about needing to include exploitation protection between patients as well as staff and patients and that patients may also need to be moved not just staff if there is a scenario between patients. Discussion followed. JO will make the recommended changes to the policy. BM asked if there was an action that the board need to take. WB discussed the options. DP motioned to accept the Mandatory Reporting Policy with suggested changes. FR seconded the motion. All in favor. Motion passed unanimously.

Conclusions: Revisions were recommended to the Mandatory Reporting Policy. The motion to accept the policy with changes was passed.

Action: Jessica will revise the policy with the recommended changes. Dawn Philibert motioned to accept the policy with changes, Frank Reed seconded the motion, all in favor. Motion passed unanimously.

Person responsible: JO will revise the policy

Due Date: Before 2/21/07

Discussed: There will be no nominations to the Board until governance issues are resolved.

Conclusions: n/a

Action: n/a

Person responsible: n/a

Due Date:

Discussed: Public Comment: Concerns were raised about passing interim policies to comply with DOJ without following the open meeting process.

Conclusions: n/a

Action: n/a

Person responsible: n/a

Due Date:

The meeting adjourned at 3:00 pm. The next meeting will be on February 21, 2007 at 1:30 pm.

Respectfully submitted,

Denise McCarty
Minute Taker